

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Maryland USA

ADDRESS (number and street) ▼

PO Box 75650

☐ Check if different than previously reported. (ACC)

Washington

DC

20013

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00581777

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☒ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
07 22 2015

through

M M M / D D D / Y Y Y Y Y Y  
12 31 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Joel Riter

Signature of Treasurer

Joel Riter

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
01 26 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Maryland USA

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
07		22		2015

To:

M M	/	D D	/	Y Y Y Y Y
12		31		2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div><div>Y Y Y Y Y</div><div>2015</div></div>		<div><div></div><div>0.00</div></div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div><div></div><div>0.00</div></div>	
(c) Total Receipts (from Line 19) .....	<div><div></div><div>300000.00</div></div>	<div><div></div><div>300000.00</div></div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div><div></div><div>300000.00</div></div>	<div><div></div><div>300000.00</div></div>
7. Total Disbursements (from Line 31).....	<div><div></div><div>271174.07</div></div>	<div><div></div><div>271174.07</div></div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<div><div></div><div>28825.93</div></div>	<div><div></div><div>28825.93</div></div>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div><div></div><div>0.00</div></div>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div><div></div><div>0.00</div></div>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Maryland USA

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	5

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	300000.00	300000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	300000.00	300000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	300000.00	300000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	300000.00	300000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	300000.00	300000.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	63979.64	63979.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	63979.64	63979.64
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	207114.43	207114.43
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	80.00	80.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	271174.07	271174.07
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	271174.07	271174.07

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	300000.00	300000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	300000.00	300000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	63979.64	63979.64
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	63979.64	63979.64

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6 OF 14

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Maryland USA

Full Name (Last, First, Middle Initial)

**A. Mark Epstein**

Mailing Address 9209 Fox Meadow Lane

City

Potomac

State

MD

Zip Code

20854

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Qualcomm, Inc.

Occupation

Senior Vice President

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2015			

Transaction ID : SA11AI.4161

Amount of Each Receipt this Period

300000.00

Contribution

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

300000.00

300000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 14

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Maryland USA

Full Name (Last, First, Middle Initial)

**A. C5 Creative Consulting, Inc.**

Mailing Address P.O. Box 11987

City Atlanta    State GA    Zip Code 30355

Purpose of Disbursement  
Campaign Consulting

001

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 05 / 2015

Transaction ID : SB21B.4163

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. C5 Creative Consulting, Inc.**

Mailing Address P.O. Box 11987

City Atlanta    State GA    Zip Code 30355

Purpose of Disbursement  
Travel expense reimbursement

002

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 05 / 2015

Transaction ID : SB21B.4164

Amount of Each Disbursement this Period

1163.07

Full Name (Last, First, Middle Initial)

**C. Delta Air Lines**

Mailing Address P.O. Box 20706

City Atlanta    State GA    Zip Code 30320

Purpose of Disbursement  
Travel expense reimbursement

002

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 07 / 2015

Transaction ID : SB21B.4164.0

Amount of Each Disbursement this Period

1004.20

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6163.07

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SB21B

Transaction ID : SB21B.4164

The remaining \$158.87 in expense reimbursements to C5 Creative Consulting were for payments to vendors which have not yet exceeded \$200 for the calendar year.

Form/Schedule:

Transaction ID:



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 14

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Maryland USA

Full Name (Last, First, Middle Initial)

**A. C5 Creative Consulting, Inc.**

Mailing Address P.O. Box 11987

City	State	Zip Code
Atlanta	GA	30355

Purpose of Disbursement  
Campaign Consulting

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2015

Transaction ID : SB21B.4190

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**B. In Transit Studios**

Mailing Address 4260 Farr Ct.

City	State	Zip Code
Grove City	OH	43123

Purpose of Disbursement  
Website services

004

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		17		2015

Transaction ID : SB21B.4175

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**C. Langdon Law LLC**

Mailing Address 8913 Cincinnati-Dayton Rd.

City	State	Zip Code
West Chester	OH	45069

Purpose of Disbursement  
Legal fees

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2015

Transaction ID : SB21B.4162

Amount of Each Disbursement this Period

13266.57
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SUBTOTAL of Disbursements This Page (optional).....▶

19516.57
----------

TOTAL This Period (last page this line number only).....▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 14

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Maryland USA

Full Name (Last, First, Middle Initial)

**A. Red Maverick Media**Mailing Address 403 N. Second St.  
Fl. 2

City Harrisburg State PA Zip Code 17101

Purpose of Disbursement  
Design consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
11 / 05 / 2015

Transaction ID : SB21B.4174

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Red Maverick Media**Mailing Address 403 N. Second St.  
Fl. 2

City Harrisburg State PA Zip Code 17101

Purpose of Disbursement  
Design consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
12 / 21 / 2015

Transaction ID : SB21B.4189

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Wilson Perkins Allen Opinion Research**

Mailing Address 1319 Classen Drive

City Oklahoma City State OK Zip Code 73103

Purpose of Disbursement  
Polling

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
11 / 17 / 2015

Transaction ID : SB21B.4178

Amount of Each Disbursement this Period

18600.00

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

28600.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

# Maryland USA

Category/  
Type

8900.00

Category/  
Type

800.00

Category/  
Type

9700.00

63979.64

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 12 OF 14  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Maryland USA</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00581777</div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>					
Full Name of Payee <b>406 Enterprises LLC</b>			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">11 / 20 / 2015</div>		
Mailing Address <b>PO Box 75727</b>			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">181199.43</div>		
City <b>Washington</b>		State <b>DC</b>	Zip Code <b>20013</b>		<b>Transaction ID : SE.4149</b>
Purpose of Expenditure <b>Mobile advertising (placement)</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">11 / 20 / 2015</div>	
Name of Federal Candidate <b>Amie Hoeber</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House    District: <b>06</b> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>MD</b>
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">181199.43</div> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>Pound, Feinstein &amp; Associates</b>			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">11 / 20 / 2015</div>		
Mailing Address <b>5614 Connecticut Ave., NW Suite 270</b>			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">3635.00</div>		
City <b>Washington</b>		State <b>DC</b>	Zip Code <b>20015</b>		<b>Transaction ID : SE.4150</b>
Purpose of Expenditure <b>Mobile advertising (production, 'Declaration' 15)</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">11 / 21 / 2015</div>	
Name of Federal Candidate <b>Amie Hoeber</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House    District: <b>06</b> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>MD</b>
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">184834.43</div> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;">184834.43</div>		
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
(c) <b>TOTAL</b> Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  <i>Joel Riter</i>			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">01 / 26 / 2016</div>		
[Electronically Filed]					

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 13 OF 14  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Maryland USA</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00581777		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border:1px solid black; padding:2px;">M M M</span> / <span style="border:1px solid black; padding:2px;">D D D</span> / <span style="border:1px solid black; padding:2px;">Y Y Y Y Y Y</span>					
Full Name of Payee <b>Pound, Feinstein &amp; Associates</b>			Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">11</span> / <span style="border:1px solid black; padding:2px;">20</span> / <span style="border:1px solid black; padding:2px;">2015</span>		
Mailing Address 5614 Connecticut Ave., NW Suite 270			Amount <span style="border:1px solid black; padding:2px;">5315.00</span>		
City Washington		State DC	Zip Code 20015		Transaction ID : <b>SE.4151</b>
Purpose of Expenditure Mobile advertising (production 'Declaration' 30)		Category/ Type	<span style="border:1px solid black; padding:2px;">004</span> <span style="border:1px solid black; padding:2px;">11</span> / <span style="border:1px solid black; padding:2px;">21</span> / <span style="border:1px solid black; padding:2px;">2015</span>		
Name of Federal Candidate Amie Hoeber		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>06</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MD</u>		
Calendar Year-To-Date Per Election for Office Sought		<span style="border:1px solid black; padding:2px;">190149.43</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <b>Pound, Feinstein &amp; Associates</b>			Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">11</span> / <span style="border:1px solid black; padding:2px;">20</span> / <span style="border:1px solid black; padding:2px;">2015</span>		
Mailing Address 5614 Connecticut Ave., NW Suite 270			Amount <span style="border:1px solid black; padding:2px;">4275.00</span>		
City Washington		State DC	Zip Code 20015		Transaction ID : <b>SE.4152</b>
Purpose of Expenditure Mobile advertising (production, 'Stronger America' 15)		Category/ Type	<span style="border:1px solid black; padding:2px;">004</span> <span style="border:1px solid black; padding:2px;">11</span> / <span style="border:1px solid black; padding:2px;">21</span> / <span style="border:1px solid black; padding:2px;">2015</span>		
Name of Federal Candidate Amie Hoeber		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>06</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MD</u>		
Calendar Year-To-Date Per Election for Office Sought		<span style="border:1px solid black; padding:2px;">194424.43</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			<span style="border:1px solid black; padding:2px;">9590.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶			<span style="border:1px solid black; padding:2px;"></span>		
(c) TOTAL Independent Expenditures.....▶			<span style="border:1px solid black; padding:2px;"></span>		
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Signature  Joel Riter		[Electronically Filed]		Date <span style="border:1px solid black; padding:2px;">01</span> / <span style="border:1px solid black; padding:2px;">26</span> / <span style="border:1px solid black; padding:2px;">2016</span>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 14 OF 14  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Maryland USA</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00581777</div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>					
Full Name of Payee <b>Pound, Feinstein &amp; Associates</b>			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">11 / 20 / 2015</div>		
Mailing Address 5614 Connecticut Ave., NW Suite 270			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">6565.00</div>		
City Washington		State DC	Zip Code 20015		<b>Transaction ID : SE.4153</b>
Purpose of Expenditure Mobile advertising (production, 'Stronger America' 30)		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">11 / 21 / 2015</div>	
Name of Federal Candidate Amie Hoeber			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House    District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: MD
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">200989.43</div> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>Pound, Feinstein &amp; Associates</b>			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">01 / 21 / 2016</div>		
Mailing Address 5614 Connecticut Ave., NW Suite 270			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">6125.00</div>		
City Washington		State DC	Zip Code 20015		<b>Transaction ID : SE.4181</b>
Purpose of Expenditure Cable advertising (production cost)		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">12 / 04 / 2015</div>	
Name of Federal Candidate Amie Hoeber			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House    District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: MD
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">207114.43</div> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;">12690.00</div>		
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
(c) <b>TOTAL</b> Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;">207114.43</div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  Joel Riter			[Electronically Filed]		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">01 / 26 / 2016</div>